## PART B - FEE(S) TRANSMITTAL

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maintenance fee notifica	ea below or alrected ou tions.	nerwise in Block 1, by (	a) specifying a new corre	spondence address	; and/or (b)	indicating a sepa	rate "FEE ADDRESS" for
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53080	7590 04/05	7/2010	hav	e its own certificate	of mailing of	or transmission.	
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Customer N	_	(Signature)					
							(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN		2	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/593,277	08/14/2008		Shigeyuki Komatsu		067471-0129 8833		8833
TITLE OF INVENTION: SEMICONDUCTOR DEVICE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810		07/06/2010
EXAM	EXAMINER		CLASS-SUBCLASS	]			
YUSHIN, N	IKOLAY K	2893	257-048000				
"Fee Address" indi	ence address or indication ondence address (or Cha W122) attached. ication (or "Fee Address" 2 or more recent) attach	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.    MCDERMOTT WILL & EMERY LLP   2   3					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  PANASONIC CORPORATION  OSaka, Japan							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🚨 Government							
4a. The following fee(s) a  Issue Fee  Yeublication Fee (N  Advance Order - #	o small entity discount profesories FOUR (	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number					
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
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Authorized Signature Date							
Typed or printed name	1 1			Registration N		139	
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